

<b>CLAIMS ONLY</b>	SERIAL NO.	FILING DATE
APPLICANT(S)		

CLAIMS						
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3					1	
4					1	
5					1	
6					1	
7					1	
8					1	
9					1	
10					1	
11	1					
12		1				
13					1	
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50						
TOTAL IND.		↓	2	↓		↓
TOTAL DEP.		↓	13	↓		↓
TOTAL CLAIMS			15			

  

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	IND.	DEP.	IND.	DEP.	IND.	DEP.
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98						
99						
100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		↓		↓		↓
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS